PTO/SB/05 (06-03)
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UTILITY PATENT APPLICATION **TRANSMITTAL**

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UTILITY PATENT APPLICATION TRANSMITTAL	Attorney Docket No.	
	First Inventor	MAMOUD SADRE
	Title	RISK MANAGEMENT FOR MANUFACTURING
(Only for new nonprovisional applications under 37 CFR 1.53(b))		EU596638192US

(6111) 101 1	Tew Horiprovisional applications under 37 CFR 1.35(b))	Express Mail Label No. 1003 966 38 19205				
See MPEP o	APPLICATION ELEMENTS chapter 600 concerning utility patent application contents.	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450				
2. See 37 3. Specifi (preferr - Descr - Cross - Stater - Refer or a c - Backg - Brief 5 - Brief 1 - Detail - Claim	red arrangement set forth below) riptive title of the invention Reference to Related Applications ment Regarding Fed sponsored R & D ence to sequence listing, a table, omputer program listing appendix ground of the Invention Summary of the Invention Description of the Drawings (if filed)	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Reader Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS				
4. A Drawir 5. Oath or Dec a. New b. Cop (for i. Appli	Ing(s) (35 U.S.C. 113) [Total Sheets] Ideration [Total Sheets] Ingle statement attached deleting inventor(s) Iname in the prior application, see 37 CFR 1.63(d)) Independent of the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). Inclease in the prior application, see 37 CFR 1.76	9. Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement Power of (when there is an assignee) Attorney 11. English Translation Document (if applicable) 12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations 13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. Other:				
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No.: 09/640272 Prior application information: Examiner STEFANO KARMIS Art Unit: For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference.						
The incorporatio	on <u>can only</u> be relied upon when a portion has been inadver 19. CORRESPON	tently omitted from the submitted application parts. DENCE ADDRESS				
Custom	ner Number:	OR Correspondence address below				
Name	MAMOUD SADRE					
Address	29 HICKORY LANE					
City	WINDHAM	State NH Zip Code 03087				
Country	U 3 A	elephone 617-217-9646 Fax 617.542.2016				
Name (Print/Ty	PE) MAMOUD SADRE	Registration No. (Attorney/Agent)				
Signature	Chulm	Date 7.7.03				

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



PTO/SB/17 (05-03)

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		for	FY	2	00	3	

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

Complete if Known				
Application Number	09/640272			
Filing Dat	8/17/2000			
	MAMOUD SADRE			
Examiner Name	STEFAND KARMIS			
Art Unit	3624			
Attorney Docket No.				

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)				
Check Credit card Money Other None	3. AD	DITIO	ONAL	FEE	S	
Credit Card Order Card Credit Card						
Deposit Account:	Fee Code	Fee (\$)		Fee (\$)	Fee Description	Fee Paid
Account	1051	130	2051	65	Surcharge - late filing fee or oath	
, Number Deposit Account:	1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
Name	1053	130	1053		Non-English specification	
The Director is authorized to: (check all that apply) Charge fee(s) indicated below Credit any overpayments	1812 2	2,520	1812		For filing a request for ex parte reexamination	
Charge fee(s) indicated below Credit any overpayments Charge any additional fee(s) during the pendency of this application	1804	920*	1804		Requesting publication of SIR prior to Examiner action	
Charge fee(s) indicated below, except for the filing fee		1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
to the above-identified deposit account.	1251	110	2251	55	Extension for reply within first month	55
FEE CALCULATION	1252	410	2252	205	Extension for reply within second month	
1. BASIC FILING FEE	1253	930	2253	465	Extension for reply within third month	
Large Entity Small Entity Fee Fee Fee Fee Fee Paid	1254	1,450	2254	725	Extension for reply within fourth month	
Code (\$) Code (\$)	1255	1.970	2255	985	Extension for reply within fifth month	
1001 750 2001 375 Utility filing fee 375	1401	320	2401	160	Notice of Appeal	
1002 330 2002 165 Design filling fee	1402	320	2402	160	Filing a brief in support of an appeal	
1003 520 2003 260 Plant filing fee	1403	280	2403		Request for oral hearing	
1004 750 2004 375 Reissue filing fee		1,510	1451	1,510	Petition to institute a public use proceeding	
1005 160 2005 80 Provisional filing fee	1452	110	2452		5 Petition to revive - unavoidable	
SUBTOTAL (1) (\$) 375	1453	1,300	2453	650	Petition to revive - unintentional	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,300	2501	650) Utility issue fee (or reissue)	<u> </u>
Extra Claims below Fee Paid	1502	470	2502	2 235	5 Design issue fee	<u> </u>
Total Claims20** = X =	1503	630	2503		5 Plant issue fee	
Independent - 3** = X = X	1460	130	1460		Petitions to the Commissioner	
Multiple Dependent	1807	50	180		0 Processing fee under 37 CFR 1.17(q)	——
Large Entity Small Entity	1806	180	180	6 18	O Submission of Information Disclosure Stmt	
Fee Fee Fee Fee Description Code (\$)	8021	40	802		Recording each patent assignment per property (times number of properties)	
1202 18 2202 9 Claims in excess of 20 1201 84 2201 42 Independent claims in excess of 3	1809	750	280	9 37	5 Filing a submission after final rejection (37 CFR 1.129(a))	
1203 280 2203 140 Multiple dependent claim, if not paid	1810	750	281	0 37	5 For each additional invention to be examined (37 CFR 1.129(b))	
1204 84 2204 42 ** Reissue independent claims over original patent	1801	750	2801	37	5 Request for Continued Examination (RCE)	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802	2 90	 Request for expedited examination of a design application 	
		•	pecify)			1/2
**SUBTOTAL (2) (\$) *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 430						
(Complete (if applicable)						
SUBMITTED BY				_		

WARNING: Information n this form may b c m publi . Credit card inf rmation should not be included on this form. Provide credit card informati n and auth rizati n on PTO-2038.

Registration No.

(Attorney/Agent)

Telephone 617-216-9646

7/2003

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MAMOUD SADRE

Name (Print/Type)

Signature

7/9/03

3624

PTO/SB/22 (05-03)

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Under the paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number. Docket Number (Opti nal) PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) In re Application of Application Number 09/640272 Filed FOR RISK MANAGEMENT FOR MANUFACTURING Examiner STEFANO KARMIS 3624 **Art Unit** is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified The requested extension and appropriate non-small-entity fee are as follows (check time period desired): One month (37 CFR 1.17(a)(1)) Two months (37 CFR 1.17(a)(2)) ☐ Three months (37 CFR 1.17(a)(3)) Four months (37 CFR 1.17(a)(4)) Five months (37 CFR 1.17(a)(5)) Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by onehalf, and the resulting fee is: \$ 37500. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to change fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, 07/10/2003 STEUMEL1 00000071 10615217 to Deposit Account Number_ I have enclosed a duplicate copy of this sheet. 55.00 OP 02 FC:2251 I am the 伊 applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). attorney or agent of record. attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. 1-7-03 617-216-9646 OUD SADRE NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. Total of forms are submitted.

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